



## REQUEST FOR TRANSFER OF THIRD PARTY PROPOSITION PLAYER SERVICES REGISTRATION/LICENSE (CGCC – 439)

When requesting to transfer from one registered/licensed primary owner to another, a registrant/licensee must complete and submit this form to the California Gambling Control Commission at 2399 Gateway Oaks Drive, Suite 100, Sacramento, CA 95833-4231 accompanied by the following:

- Two 2x2 inch, passport-style color photographs taken within the last 30 days
- A \$250.00 check made payable to the California Gambling Control Commission.

Type or print (in ink) all information requested on this application form. If additional space is needed, please note response on a separate sheet of paper and attach to the application.

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### SECTION 1: APPLICANT INFORMATION

Applicant's Full Legal Name:

First	MI	Last
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Mailing Address:

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Applicant's Telephone Number:

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Social Security Number: (for identification purposes)

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TPPPS Badge #:

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### SECTION 2: PRIMARY OWNER INFORMATION

Name of primary owner (employer) you are transferring **from**:

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Date of disassociation:

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Name of primary owner (employer) you are transferring **to**:

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Employment Date:

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### SECTION 3: DECLARATION

I declare under penalty of perjury under the laws of the State of California that the foregoing information, and all information submitted with this application is true, correct, and complete.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Designated Officer Signature: \_\_\_\_\_ Date: \_\_\_\_\_